ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	S.Z		4-25-01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	BZ	897	05-01-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔ .... Rejected	N .... Non-elected
= .... Allowed	I .... Interference
− (Through numeral)... Canceled	A .... Appeal
÷ .... Restricted	O .... Objected

Claim		Date	Claim		Date	Claim		Date
Final	Original	1 2 3 / 2 11 01 04	Final	Original		Final	Original	
				51			101	
				52			102	
				53			103	
				54			104	
				55			105	
				56			106	
				57			107	
	8 ÷ ✔			58			108	
	9 ✔			59			109	
	10 ✔			60			110	
	11 ✔			61			111	
	12 ✔			62			112	
	13 ✔			63			113	
	14 N			64			114	
	15 N			65			115	
	16 ÷ N			66			116	
				67			117	
				68			118	
				69			119	
				70			120	
				71			121	
	22 ÷ N			72			122	
	23 N			73			123	
	24 N			74			124	
	25 N			75			125	
	26 N			76			126	
	27 N			77			127	
	28 N			78			128	
	29 N			79			129	
	30 ✔			80			130	
	31 ✔			81			131	
	32 ✔			82			132	
	33 ✔			83			133	
	34 ✔			84			134	
	35 ✔			85			135	
	36 ✔			86			136	
	37 ÷ ✔			87			137	
	38			88			138	
	39			89			139	
	40			90			140	
	41			91			141	
	42			92			142	
	43			93			143	
	44			94			144	
	45			95			145	
	46			96			146	
	47			97			147	
	48			98			148	
	49			99			149	
	50			100			150	

If more than 150 claims or 10 actions
staple additional sheet here

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